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Summary

A is for alcohol-related liver disease

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Primary Care

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The speaker presented evidence that WHO-recommended public health policies such as minimum unit pricing and advertising restrictions can substantially reduce alcohol-related liver disease mortality in Europe, where alcohol causes over 300,000 deaths annually.

KEY POINTS

- The speaker reported that minimum unit pricing in Scotland (2018) decreased alcohol-attributed mortality by 13% and alcohol-related liver disease mortality by 11%, as stated by the speaker.
- Lithuania's combination of increased taxes, restricted sale hours, and total advertising ban produced one of the steepest falls in alcohol consumption and mortality, according to the speaker.
- The speaker stated that less than 25% of European countries have good or optimal alcohol preparedness, with Western European countries better prepared than Eastern countries.
- The speaker reported that 73% of UK survey respondents with chronic liver disease experienced stigma, and severe stigma was associated with a six-fold reduction in willingness to seek health care.
- The speaker stated that the alcohol industry invests over €9 million annually to oppose alcohol policies and that alcohol industry representatives outnumber public health advocates 95% to 5% in EU Commission meetings.
- The speaker, identifying as a clinician and researcher in alcohol-related liver disease, stated that physicians should advocate for public health policies against alcohol.

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